

should be given freely from the onset of symptoms, with or without insulin; in the presence of severe hepatic symptoms, it may be given intravenously.

During convalescence a light diet is indicated so long as the urine shows evidence of the toxic action of the gas. Full doses of iron and liver extract are also indicated.

PARALYSANT GASES.

These gases are hydrocyanic and hydrogen sulphide. They both act on the nervous system, are extremely deadly, but lethal concentrations are not easy to arrange under war conditions. It is, however, possible that the enemy may have been able to overcome this difficulty by combining them with a heavy molecule, and making them available for use in warfare.

Hydrocyanic acid is a protoplasmic poison; in high concentrations it is capable of causing death through paralysis of the respiratory centre in the brain stem.

The symptoms are first an uneasiness, vertigo, palpitation, and hurried breathing. If the gas is present in lethal concentrations, these concentrations are followed by convulsions and death by paralysis of the respiratory centre and circulatory failure.

Treatment must be immediate, and is primarily directed to restoration of the circulation. The patient must be removed from the infected area, and artificial respiration used. Oxygen with a mixture of five per cent. carbon dioxide is useful in stimulating normal respiratory efforts.

Hydrogen sulphite acts as a local irritant and as a systemic poison. High concentrations cause death with dramatic suddenness; moderate concentrations give rise to bronchitis and pulmonary oedema. The symptoms are panting respiration, pallor, and the rapid onset of unconsciousness, followed by convulsive movements and the cessation of breathing.

Treatment must be prompt, and the patient must be removed immediately from the infected area. Artificial respiration must be given with the inhalation of oxygen mixed with five per cent. carbon.

R. H. H.

REVIEW

CEREBRO-SPINAL FEVER. By Denis Brinton, D.M.(Oxon.), F.R.C.P.(Lond.).
Edinburgh: E. & S. Livingstone. 1941. Pp. 163. Plates 4. 8s. 6d. net.

THE author includes in his preface to this book the statement that last year he became aware of the need for a small book to review this subject and its modern treatment. This statement may be true, but as it appears that the author's experience of cerebro-spinal fever consists of forty-six cases personally observed during 1940, he does not seem to have the necessary experience to justify his undertaking the task. Whilst the book is pleasant reading, it savours throughout of a lack of intimate personal experience in the handling of a variety of cases of cerebro-spinal fever which must limit its value. One statement cannot pass unchallenged: on page 130 it is implied that for an adult a total intake of two to three pints of fluid in twenty-four hours is adequate. That is not the general teaching in the treatment of acute infectious diseases. There is no illustration of any skin manifestation of the disease likely to be of assistance in making a diagnosis, whilst four plates are given to pictures of sulphanilamide rashes.